

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		08/19/00
O.I.P.E. CLASSIFIER			5/22/00
FORMALITY REVIEW		71435	9/22/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

APPLICATION NO.  
09/63564

APPLICANTS Paul F.  
ILL OF NY

System

TITLE APPLICANT

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Form PTO-436A  
(Rev. 6/99)

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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